



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

L. Parks
6-4-02
#3/IDS

Applicant(s): Bardy

Serial No.: 10/042,402

Filed: 1/7/2002

Title: System And Method For Providing
Diagnosis And Monitoring Of
Congestive Heart Failure For Use In
Automated Patient Care

Attorney Docket No.: 003.0254.01

Group Art Unit:

3762

Examiner:

Unassigned

RECEIVED
MAY 29 2002
TECHNOLOGY CENTER R3700

Commissioner for Patents
Washington, D.C. 20231

INFORMATION DISCLOSURE STATEMENT

Dear Sir:

This Information Disclosure Statement is submitted:

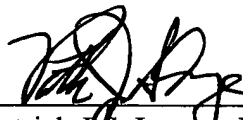
- ☒ under 37 CFR 1.97(b), or
(Within three months of filing national application; or date of entry of international application; or before mailing date of first office action on the merits; whichever occurs last)
- ☐ under 37 CFR 1.97(c) together with either a:
- ☐ Statement under 37 CFR 1.97(e), or
 - ☐ a \$180.00 fee under 37 CFR 1.17(p), or
(After the CFR 1.97(b) time period, but before final action or notice of allowance, whichever occurs first)
- ☐ under 37 CFR 1.97(d) together with a:
- ☐ Statement under 37 CFR 1.97(e), and
 - ☐ a \$180.00 fee set forth in 37 CFR 1.17(p).
(Filed after final action or notice of allowance, whichever occurs first, but before payment of the issue fee)

☒ Applicant(s) submit herewith Form PTO 1449-Information Disclosure Citation together with copies, of patents, publications or other information of which applicant(s) are aware, which applicant(s) believe(s) may be material to the examination of this application and for which there may be a duty to disclose in accordance with 37 CFR 1.56.

The relevance of the attached references is that this is the closest art of which Applicant is aware. Applicant submits that the above references taken alone or in combination neither anticipate nor render obvious the present invention. Consideration of the foregoing in relation to this application is respectfully requested.

It is requested that the information disclosed herein be made of record in this application.

Respectfully submitted,



The Law Offices of Patrick J.S. Inouye
810 3rd Avenue, Suite 258
Seattle, WA 98104
(206) 381-3900
(206) 381-3999

Patrick J.S. Inouye, Esq.
Attorney/Agent for Applicant(s)
Reg. No. 40297

Date: **MAY 21 2002**

Telephone No.: (206) 381-3900



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/08A (10-01)
Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>				Complete if Known	
				Application Number	10/042,402
				Filing Date	1/7/2002
				First Named Inventor	Bardy
				Art Unit	3762
				Examiner Name	Unassigned
				Attorney Docket Number	003.0254.01
Sheet	1	of	2		

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number - Kind Code ² (if known)			
		US-5,660,183	8/26/1997	Chianq et al.	
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			

RECEIVED
MAY 29 2002
TECHNOLOGY CENTER R3700

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³ - Number ⁴ - Kind Code ⁵ (if known)				
		EP 0 531 889 A2	3/17/1993	Hewlett-Packard		
		WO 99/46718	9/16/1999	Healthware Corporation		

Examiner Signature		Date Considered	
---------------------------	--	------------------------	--

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.
¹Applicant's unique citation designation number (optional). ²See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04.
³Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶Applicant is to place a check mark here if English language Translation is attached.
Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:** Assistant Commissioner for Patents, Washington, DC 20231

U.S. Patent Application entitled: "System And Method For Providing Diagnosis And Monitoring
Of Congestive Heart Failure For Use In Automated Patient Care"

Applicant: G.H. Bardy
Serial No.: 10/042,402

Filed: January 7, 2002

Please stamp and confirm receipt in the U.S. Patent & Trademark Office of the following:

- ☒ USPTO Transmittal
- ☒ Transmittal of Information Disclosure Statement (Under 37 CFR 1.97(b))
- ☒ Form PTO-1449
- ☒ Copies of: 1 U.S. Patent Documents, 2 Foreign Patent Documents, and
1 Other Documents
- ☒ Other: Postcard

Attorney Docket No.: 003.0254.01

Date Mailed:

Attorney: Patrick J.S. Inouye
Reg. No. 40,297

MAY 21 2002

3762



Please type a plus sign (+) inside this box



PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/042,402
	Filing Date	January 7, 2002
	First Named Inventor	Bardy, Gust
	Group Art Unit	3762
	Examiner Name	Unassigned
Total Number of Pages in This Submission	Attorney Docket Number	003.0254.01

RECEIVED
MAY 29 2002
TECHNOLOGY CENTER R&D

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement and Transmittal Letter <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 4 Published References Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Law Offices of Patrick J.S. Inouye
Signature	
Date	MAY 21 2002

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date: MAY 21 2002			
Type or printed name	Casey Leichter		
Signature		Date	MAY 21 2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.